

Associate Plan Contributions

The contribution amount is determined by the level of coverage the associate has selected. Below is an outline of the bi-weekly associate contributions. A Premium Conversion Plan (Section 125) allows associates to pay their portion of the premiums with pre-tax dollars.

MEDICAL PLAN ASSOCIATE BI-WEEKLY DEDUCTION	PPO PLAN	HSA PLAN
Associate Only	\$115.00	\$75.00
Associate + Spouse	\$271.00	\$183.50
Associate + 1 Child	\$187.50	\$107.50
Associate + Children	\$225.00	\$142.50
Associate + Family	\$332.50	\$232.50

DENTAL PLAN ASSOCIATE BI-WEEKLY DEDUCTION	BASE PLAN	PREMIUM PLAN
Associate Only	\$5.00	\$7.00
Associate + Spouse	\$10.00	\$14.00
Associate + 1 Child	\$10.00	\$14.00
Associate + Children	\$15.00	\$21.00
Associate + Family	\$15.00	\$21.00

VISION PLAN ASSOCIATE BI-WEEKLY DEDUCTION	VISION PLAN
Associate Only	\$1.00
Associate + Spouse	\$2.00
Associate + 1 Child	\$2.00
Associate + Children	\$3.00
Associate + Family	\$3.00

To encourage a healthier lifestyle and to assist with the increased health costs associated with tobacco use, Four Seasons' medical plans include a Tobacco Surcharge. The surcharge is applied to all associates and dependents over the age of 18 who are tobacco users and are enrolled in the medical plan. The \$25.00 per tobacco user per paycheck surcharge is in addition to associate contributions. **Important Note:** ALL associates who enroll in medical coverage must certify a Tobacco User status for themselves and any covered dependents, age 18 years or older. This can be completed online or through a paper form. If you do not return this information, you will be charged the Tobacco Surcharge, regardless of your tobacco use.